

Introduced by Senator Hill

February 10, 2016

An act relating to outpatient health facilities.

LEGISLATIVE COUNSEL'S DIGEST

SB 994, as introduced, Hill. Outpatient health facilities: antimicrobial stewardship.

Under existing law, health facilities, including, among others, general acute care hospitals, skilled nursing facilities, primary care clinics, and specialty clinics, are licensed and regulated by the State Department of Public Health, and a violation of those provisions is a crime. Existing law requires that each general acute care hospital, on or before July 1, 2015, adopt and implement an antimicrobial stewardship policy in accordance with guidelines established by the federal government and professional organizations that includes a process to evaluate the judicious use of antibiotics, as specified. Existing law requires each skilled nursing facility, on or before January 1, 2017, to adopt and implement an antimicrobial stewardship policy consistent with guidelines developed by the federal Centers for Disease Control and Prevention and other specified entities.

This bill would state the intent of the Legislature to enact legislation that would promote the establishment of antimicrobial stewardship programs or policies in outpatient health facilities. The bill makes related findings and declarations.

Vote: majority. Appropriation: no. Fiscal committee: no.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. It is the intent of the Legislature to enact
2 legislation that would promote the establishment of antimicrobial
3 stewardship programs or policies in outpatient health facilities.

4 SEC. 2. The Legislature finds and declares all of the following:

5 (a) The overuse and misuse of antibiotics can lead to the
6 development of antibiotic-resistant infections, a major public health
7 threat.

8 (b) The federal Centers for Disease Control and Prevention
9 (CDC) estimates that at least 2,000,000 Americans are infected
10 with, and at least 23,000 Americans die as a result of,
11 antibiotic-resistant infections every year, resulting in at least \$20
12 billion in direct health care costs and at least \$35 billion in lost
13 productivity in the United States.

14 (c) Antibiotic resistance is a growing threat. A recent study
15 commissioned by the United Kingdom determined that by 2050,
16 worldwide, more people will die from antibiotic-resistant infections
17 than from cancer.

18 (d) The overuse and misuse of antibiotics in human medicine
19 is a significant factor driving the development of antibiotic
20 resistance, and a majority of antibiotics are prescribed in outpatient
21 settings, including primary care physician offices, outpatient
22 settings where physician assistants and nurse practitioners work,
23 dentist offices, and other specialty health care providers.

24 (e) According to the CDC, in one year, 262.5 million courses
25 of antibiotics are written in outpatient settings. This equates to
26 more than five prescriptions written each year for every six people
27 in the United States. The CDC estimates that over one-half of the
28 antibiotics prescribed in outpatient settings are unnecessary.

29 (f) More than 10 million courses of antibiotics are prescribed
30 each year for viral conditions that do not benefit from antibiotics.

31 (g) Antibiotic stewardship programs, which are already required
32 in general acute care hospitals and skilled nursing facilities in the
33 state, but not in outpatient settings, are an effective way to reduce
34 inappropriate antibiotic use and the prevalence of
35 antibiotic-resistant infections.

36 (h) The President's National Action Plan for Combating
37 Antibiotic-resistant Bacteria calls for the establishment of antibiotic

- 1 stewardship activities in all health care delivery settings, including
- 2 outpatient settings, by 2020.

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